## United States Senate WASHINGTON, DC 20510

March 03, 2021

Pamela S. Karlan Principal Deputy Assistant Attorney General Civil Rights Division Department of Justice 950 Pennsylvania Avenue, NW Washington, DC 20530-0001 Dr. Robinsue Frohboese Acting Director and Principal Deputy Office for Civil Rights (OCR) Department of Health and Human Services 200 Independence Avenue, SW Washington, D.C. 20201

Dear Deputy Assistant Karlan and Director Frohboese:

As you know, an equitable and efficient distribution of the COVID-19 vaccines is critical to the health and wellbeing of individuals and the economy. In order to make sure that everyone in the United States is able to access these vaccines, we must attend to sectors of the population that have access needs, in particular individuals with disabilities who may need accommodations to access vaccination sites and register for an appointment. Additionally, we believe it is of the utmost importance to ensure that websites and mobile applications used to access COVID-19 vaccinations meet standard accessibility requirements.

We appreciate that the Centers for Disease Control (CDC) has developed communication toolkits about COVID-19 for people with disabilities.<sup>1</sup> However, this toolkit is not enough to ensure that all Americans prioritized for a COVID-19 vaccine can access it. We have heard from constituents who are blind and visually impaired who cannot fully access these websites with screen readers and are concerned that this is just one of several accessibility issues with the vaccine distribution. A recent report by Kaiser Health News confirmed these concerns, reporting that nearly all of the 94 websites they had checked for accessibility had accessibility issues.<sup>2</sup>

Since each state has the option to develop its own vaccine registration system and distribution process, we ask that you ensure that these processes meet or exceed the requirements of the Americans with Disabilities Act and Section 504 and 508 of the Rehabilitation Act (29 U.S.C. 794d), as amended in 1998. In particular, we ask that you determine that registration websites, vaccination sites, and vaccine information have four types of access: physical, sensory, cognitive and technological.<sup>3</sup>

We ask that you work with states to ensure that vaccination sites are physically accessible and easy to navigate for those with a physical disability who use wheelchairs, walkers or other mobility aids. To accommodate these needs, routes, parking, and restrooms at these sites should

<sup>&</sup>lt;sup>1</sup> <u>https://www.cdc.gov/coronavirus/2019-ncov/communication/toolkits/people-with-disabilities.html</u>

<sup>&</sup>lt;sup>2</sup> <u>https://khn.org/news/article/covid-vaccine-websites-violate-disability-laws-create-inequity-for-the-blind/</u>

<sup>&</sup>lt;sup>3</sup> <u>https://www.health.state.mn.us/communities/equity/about/c19testing.html</u>

be accessible. The sites should also provide places to sit in a way that allows for safe social distancing for those who cannot stand for long periods of time. People with disabilities who require accommodations should also be able to be accompanied by a caregiver for the duration of their appointment.

Vaccination sites should have procedures in place to accommodate individuals who have difficulties waiting for long periods due to sensory disabilities. For example, some people with autism or who have experienced trauma are sensitive to lights, sounds, smells or touch, which makes waiting in lines in busy settings and wearing masks for long periods of time more difficult. Sensory access requires that vaccination sites proactively accommodate these needs with alternatives for those who need them. In addition, to ensure cognitive access, both registration websites and vaccination sites should include explanations that are easy to understand and available in multiple modalities such as plain language or visual storyboards. Additionally, communication while wearing masks should be augmented by other forms of communication, for example, to accommodate individuals who are deaf or hard of hearing.

Finally, technological access requires ensuring that individuals with disabilities can easily navigate vaccine registration websites and any other digital components of the vaccination process. These websites should be readable by a screen reader for someone who has low vision or is blind. In addition, information and data should be presented in ways that are accessible to those experiencing colorblindness. Updates about new priority groups and appointment slots should be available in multiple formats, including over the phone, and caregivers should be able to register individuals with disabilities directly when necessary. Additionally, communication by phone should be accessible to individuals who are deaf and hard of hearing. We ask that you work with states to improve their vaccine registration processes to ensure that they are accessible, including that relevant websites and mobile applications align with the most up to date Web Content Accessibility Guidelines (WCAG).<sup>4</sup>

In addition to creating ADA-compliant vaccination sites and improving registration websites, states should conduct outreach to individuals with disabilities and caregivers to assure them that their needs can be accommodated. Outreach is critical for ensuring that the disability community is engaged in the process of creating an accessible vaccine distribution process, sharing information within the community, increasing vaccine confidence, and communicating how individuals with disabilities can be vaccinated with appropriate accommodations. As states improve their distribution process, this active outreach is also necessary to improve awareness of changes for those who have attempted and been unable to sign up for or attend an appointment in the past due to accessibility issues.

To better understand how the Department of Justice and the Department of Health and Human Services are currently working to address these issues, we request that you respond to the following questions no later than March 17, 2021:

1. Can you explain the processes in place for ensuring that vaccination sites are accessible for individuals with disabilities as required by the ADA and the Rehabilitation Act?

<sup>&</sup>lt;sup>4</sup> <u>https://www.w3.org/WAI/standards-guidelines/wcag/</u>

- 2. How are you working with states to create vaccine registration websites that meet the Web Content Accessibility Guidelines?
- 3. What technical assistance or guidance have you provided to states to ensure people with disabilities are able to access the vaccine, including outreach activities?
- 4. How are your offices conducting oversight responsibility related to accessible vaccination services?

Thank you for your attention to this matter. For any questions, please do not hesitate to reach out to Brittany Matthews (<u>brittany\_matthews@hassan.senate.gov</u>).

Sincerely,

i Idan

Margaret Wood Hassan United States Senator

Unhert

Tammy Duckworth United States Senator

/s/ Robert P. Casey, Jr.

Robert P. Casey, Jr. United States Senator

Sherrod Brown United States Senator

/s/ Elizabeth Warren

Elizabeth Warren United States Senator

Tim Kaine United States Senator

/s/ Tina Smith

Tina Smith United States Senator /s/ Chris Van Hollen

Chris Van Hollen United States Senator

/s/ Edward J. Markey

Edward J. Markey United States Senator

/s/ Amy Klobuchar

Amy Klobuchar United States Senator /s/ Jeanne Shaheen

Jeanne Shaheen United States Senator

c.B

Cory A. Booker United States Senator

/s/ Catherine Cortez Masto

Catherine Cortez Masto United States Senator